

**Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions**

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|---|--|--|---|
| 1. Agency Name City of San Jose | | Date Stamp 2019 JUN 28 PM 3:05 San Jose City CL | California Form 802 For Official Use Only |
| Division, Department, or Region (if applicable) City Manager's Office | | | |
| Designated Agency Contact (Name, Title) David Sykes, City Manager | | | |
| Area Code/Phone Number (408) 535-8100 | E-mail webmaster.manager@sanjoseca.gov | <input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year) | |

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 75.00

Event Description: SPUR Annual Summer Party Date(s) 6 / 12 / 19
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: SPUR
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

| A. Name of Agency, Department or Unit | Number of Ticket(s)/ Passes | Describe the public purpose made pursuant to the agency's policy |
|---|-----------------------------|---|
| | | |
| | | |
| B. Name of Individual (Last, First) | Number of Ticket(s)/ Passes | Identify one of the following: |
| See attached list | 23 | Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> City of San Jose representative at the event |
| | | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> |
| C. Name of Outside Organization (include address and description) | Number of Ticket(s)/ Passes | Describe the public purpose made pursuant to the agency's policy |
| | | |
| | | |

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

D. Sykes D. SYKES CITY MANAGER 6/28/19
 Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

SPUR Annual Summer Party

June 12, 2019

Attendees

| <u>Last Name</u> | <u>First Name</u> | <u>Quantity of Tickets</u> |
|-------------------------|--------------------------|---------------------------------------|
| Jones | Chappie | 1 |
| Kohl | Cassidy | 1 |
| Jimenez | Sergio | 2 |
| Peralez | Raul | 2 |
| Diep | Lan | 2 |
| Arenas | Sylvia | 1 |
| McGarrity | Patrick | 1 |
| Foley | Pam | 2 |
| Khamis | Johnny | 2 |
| Walesh | Kim | 1 |
| Klein | Nanci | 1 |
| Burnham | Nicolle | 1 |
| Donato-Weinstein | Nathan | 1 |
| Hughey | Rosalynn | 1 |
| Rios | Angel | 1 |
| Romanow | Kerrie | 1 |
| Wilcox | Lee | 1 |
| Zenk | Jessica | 1 |